

EXHIBIT A

February 6, 2024 Motion to Dismiss Hearing
Statements Chart

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmt #	Cite	Date	Source	Speaker	Statement
1	74	May 3, 2018	Earnings Call	Thomas J. Riga	<p>On the regulatory side, <i>we are in regular discussions with the FDA to expedite the regulatory approval for poziotinib.</i> We've conducted a pre-submission meeting with the agency along with Dr. Heymach from MD Anderson. The tone of the meeting was very encouraging, and the understanding around the unmet medical need for patients with exon 20 insertion mutations was very clear.</p> <p>As we evaluate the criteria for breakthrough therapy designation, we believe that pozi meets the criteria if the early data continues. When we look at those criteria, there are 2: first, there needs to be a clear unmet medical need, and <i>second, the potential for substantial improvement over existing therapies needs to be there. We think pozi qualifies for both.</i>¹</p>
2	74	May 3, 2018	Earnings Call	Joseph W. Turgeon	<p>Patients, as you know, with this disease have a PFS of 1.8 months. So it's a terrible, terrible prognosis. <i>Current therapies only have less than 10% - I think a 6% to 10% response rate. So we have huge unmet need,</i> terrible prognosis.</p>
3	74	May 3, 2018	Earnings Call	Joseph W. Turgeon	<p>As we've said in the past, we had a preliminary meeting with the agency. This was talking about breakthrough designation. <i>We know what the requirements are. We feel we meet the criteria.</i> And I think in the not-too-distant future, we'll go to a second meeting with them. <i>And our goal is to establish breakthrough designation. We feel we meet those criteria.</i></p>

¹ Emphasis is added throughout.

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmnt #	Cite	Date	Source	Speaker	Statement
4	75	May 16, 2018	Corporate Presentation	Joseph W. Turgeon	I don't know if you know this, lung cancer is a leading cause of death of all the cancers because, not because of the prevalence but because the percent of the people who actually die. <i>So it's very, very high unmet need, very important.</i> When you get to these exon 20 insertion mutations, talking about unmet need, you have a progression-free survival of only 1.8 months and <i>current TKIs and other therapies only have a 6% to 8% response rate, huge unmet need.</i>
5	75	May 16, 2018	Corporate Presentation	Joseph W. Turgeon	Now let me give you a perspective. Before we started this trial, right here in Las Vegas, I had 16 of the world thought leaders in lung, in a room in a hotel down the street. And I said, okay, tell me, what is a home run here, in your guys' eyes? You guys do this for a living. I know as a drug developer, <i>if I can get a 20% to 30% response rate, I can get a drug approved.</i> But what's the home run that I really want to look forward and hope for? Here's what they told me 2 things, they said, <i>if you get a 40% or more response rate, that's a home run.</i> The second thing, on duration. If you can get anything from 4 to 6 month, remember, I told you, you have a PFS of only 1.8 months. You've got a home run. <i>What I'm pleased to tell on an early data, why there's so much excitement, that we have 64% confirm response rate.</i> And as far as duration, we haven't hit the median yet, and we know we're at 6.6 months in these initial patients. That's exciting and promising.
6	76	August 9, 2018	Earnings Call	Thomas J. Riga	As we move forward with our conversations with the FDA, the MD Anderson data will be the backbone of our discussions. We fully expect to gain clarity on this pathway by the end of the year. So here's what we know about poziotinib today. <i>We've seen very strong early data in an area of high unmet medical need. We have alignment with the agency on our Phase II trial, and we have a clear shot at BTD.</i>

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmt #	Cite	Date	Source	Speaker	Statement
7	76	August 9, 2018	Earnings Call	Thomas J. Riga	I think you start with memory lane of where we are and <i>current available treatments is less than 10%</i> . So obviously this is a patient population that needs a solution because today's solutions simply aren't working. <i>So our conversations with the agency, obviously, do go into the statistics that are expected, and we're very much aligned with the agency.</i> And I'll leave it there.
8	78	November 8, 2018	Earnings Call	Thomas J. Riga	David, we're thrilled to have submitted the application for BTB, and we remain very steadfast in our belief that there is an unmet need, and <i>pozotinib is showing indications of being substantially better than currently available treatments. That's ultimately the criteria.</i> Now the FDA will decide ultimately and where that goes, but there are multiple regulatory pathways besides BTB, like you had mentioned in the fast track setting and others that exist, but we are thrilled to have applied for that application and <i>believe that the drug qualifies.</i>
9	81	August 8, 2019	Earnings Call	Thomas J. Riga	We've, obviously, looked at that data in detail. I think it's pretty early. It looks like that study is starting. <i>I think our position, we feel really strong about with the data readout in Q4 and is well ahead in the development life cycle with pozotinib.</i> So we'll have to see what that market looks like. I think what it really says is that <i>there is real unmet need for this patient population.</i> As more and more compounds come into the full, I think it speaks to the solutions that patients need, and we're pleased to be at the forefront of that.

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmt #	Cite	Date	Source	Speaker	Statement
10	82	September 11, 2019	Corporate Presentation	Joseph W. Turgeon	We – MD Anderson did a Phase II, specifically in exon 20, both EGFR and HER2. <i>And last year, at World Lung, showed a 43% overall response rate, which was much higher than anything. There's nothing that works. There's nothing indicated for these poor patients.</i> The prognosis is very poor. PFS is 1.8 months. They progress very quickly and die. And so this is what the – where the exciting data came from.
11	83	October 2, 2019	Corporate Presentation	Francois J. Lebel	So, <i>a huge medical need, no drug is approved.</i> And we are in a leading position [right] now in developing a tyrosine kinase inhibitor that has [a] unique ability to work against Exon 20 in vitro in collaboration with M.D. Anderson. As shown Dr. Heymach there, who is the Chief of Thoracic Oncology, showed in a substantial – in the largest series in the world of Exon 20 patients, <i>has shown a response rate of 43%</i> or so and a tolerable side effect profile in line with other tyrosine kinase inhibitors.

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmt #	Cite	Date	Source	Speaker	Statement
12	83	October 2, 2019	Corporate Presentation	Francois J. Lebel	<p>Whenever you have a single site study in general the data often is a little better than when you do a multi-centric study. <i>But we made some slight change to the study that should help us</i> (technical difficulty) could go against us. But so the original data done at M.D. Anderson, single site. The images, the scans were read locally and when they were would run into toxicity, the way in which they would reduce the amount of drug the patient received were by an increment of 4 mg.</p> <p>So, currently dose on both studies, you start at 16 mg. And if you run into some toxicity Dr. Heymach would have dropped it by 4 and by 4. We've made some change where we don't drop the doses fast; so we drop the dose by 2 mg. <i>So, that should allow us to keep patient on drug longer and that's the name of the game.</i> The longer the patient is on drug that is when you could derive the benefit.</p> <p>The other thing that we have done, we have central imaging labs and we also introduced a first read – Dr. Heymach in the first study was reading the – looking for a response every eight weeks. We've introduced a first scan at four weeks. So, that should allow us to pick up response at an earlier time and potentially add time on duration of response. <i>It should play in our favor.</i></p> <p>The other thing we've done as well is, other than a lower increment of when you drop the dose. Also additionally what we've done is we prophylax every patient for – against diarrhea. One of the very common side effects when you use a TKI, it's a problem with the class, and actually is an indication that the drug blocks the EGFR receptor. They get rash and they get diarrhea or it impacts the gut. So we are prophylaxing all the patients against diarrhea. Dr. Heymach was not doing that, so <i>that should play in our favor.</i></p>

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmnt #	Cite	Date	Source	Speaker	Statement
13	86	November 4, 2020	Earnings Call	Joseph W. Turgeon	<i>I'm really confident in our ability to meet our corporate objectives and advance our programs with the aspiration of bringing new treatments to the patients with cancer who need it.</i>
14	91	September 11, 2019	Corporate Presentation	Joseph W. Turgeon	<p>So about 2 weeks before the end of March, we had a meeting with the agency, and they said 'By the way, we have an issue with the CMC portion. We had 2 weeks left until the 60 days were up.' And I said, <i>'We need some additional information, nothing that was over the top, but we need this information.'</i> And we have formatting issues. We had a lot of translation because a lot of it was done in Korea, and they didn't like the way we were translating things. We had to reformat some of the tabling and things.</p> <p>So the bottom line is, we had to get some additional information. We knew we couldn't do it by the 29th of March. <i>So we said, 'Why don't we voluntarily – we'll pull it.'</i> Then they said, <i>'Fine,'</i> without prejudice. They said, <i>'We'll give you exactly what we want.'</i> <i>We've since met with them. They gave it to us, and I'm happy to tell you we're in good shape to launching – to submit it in the fourth quarter.</i></p>
15	93	November 7, 2019	Earnings Call	Joseph W. Turgeon	ROLONTIS is our late-stage drug being developed for the treatment of chemotherapy- induced neutropenia. <i>As you recall, we voluntarily withdrew our BLA application earlier this year. Since then, we worked closely with the FDA and recently submitted a robust package. We look forward to competing in this market.</i>

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmt #	Cite	Date	Source	Speaker	Statement
16	98	November 4, 2020	Earnings Call	Francois J. Lebel	<i>On the manufacturing side, we have conducted multiple mock inspections of our plant and are exploring ways to expedite the inspection, possibly using alternative methods to ensure the earliest completion of the review of our BLA during this COVID-19 pandemic.</i>
17	98	November 4, 2020	Earnings Call	Joseph W. Turgeon	<p>And I want to stress another thing. <i>We are absolutely ready for this inspection. We've been ready for a long time. We welcome it.</i> As a matter of fact, the third part of your question was the mock inspections, was it required? They're certainly not required by the agency. <i>We do that to make sure we're ready. And I can tell you, we have Spectrum boots on ground there.</i> We have Hanmi, which I mentioned, is a world-class manufacturer with a world-class plant. <i>There are people already, and we work very closely with them with these mock inspections.</i></p> <p>And we have a third leg to the stool. <i>We have outside experts we've hired to run these – not only run these mock inspections, but also help the readiness. And these are people who have done this for a living. They do this – they know exactly what people – what the FDA is looking for an inspection. So we feel we're ready. We welcome the inspection and we can't wait.</i></p>

February 6, 2024 Motion to Dismiss Hearing Statements Chart

Stmnt #	Cite	Date	Source	Speaker	Statement
18	99	December 22, 2020	Conference Call	Joseph W. Turgeon	<p>I can't give you an exact date when it will be inspected. But I'm going to tell you, <i>we're ready</i>.</p> <p>The facility has been through <i>multiple mock inspections</i>. It's kind of like the army now is what I say, we're still going through the drill on <i>a weekly basis</i>, still doing the mock inspections, getting ready for any questions we might get. We have <i>Spectrum people on the ground at the plant</i>. We have, of course, Hanmi people who are very well prepared, been working with us, and we have third-party experts there working for the readiness. <i>So we really feel we're ready for this inspection</i>.</p>
19	101	March 30, 2021	Earnings Call	Francois J. Lebel	Regarding the deferred action on our ROLONTIS filing that Joe mentioned, <i>we believe that we have answered satisfactorily all questions from the FDA related to the review of the BLA. And we believe that the inspection represents the final step in the review process. We and our partner, Hanmi, are ready for the FDA pre-approval plant inspection that has been scheduled for May.</i>
20	102	May 13, 2021	Earnings Call	Francois J. Lebel	Now let me shift to ROLONTIS. <i>On the regulatory side, Joe has already updated you on the status of the pre-approval inspection, and we remain confident that our preparation with our partner Hanmi, should result in a positive outcome for this FDA plant inspection.</i>
21	102	May 13, 2021	Earnings Call	Joseph W. Turgeon	<i>We're prepared for the inspection, we're looking forward to it.</i> I can't give you an exact date, but I think the FDA would take a reasonable amount of time to get back to us once the inspection is done and we feel that's the last step. So without giving an exact time, I think it'll be a reasonable amount of time after the inspection is done.